

REVISED Stanislaus Plan of Correction
Per the County Performance Contract Review Report for Review Dates March 3 – 5, 2020

Finding # or Suggested Improvement #	Finding or Suggested Improvement	Recommendation # (State Corrective Action Step / Identify Timeline / and Evidence of Corrections / Mechanisms for Monitoring Effectiveness)	Score – Comments/ Notes
Finding # 1	Stanislaus County's Community Services and Supports (CSS) programs/services were inconsistent with the approved FY 2017-20 Three-Year Program and Expenditure Plan (Plan), FY 2018-19 Annual Update (Update), and FY 2018-19 Annual Revenue and Expenditure Report (ARER). Welfare and Institutions Code (W&I Code) section 5892(g)).	<p>Recommendation # 1: The County must ensure that the program names listed in the CSS component section of the approved FY 2020-23 Plan and FY 2019-20 Update, and each subsequent year thereafter, are consistent with the budget pages and names in the ARER. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures. Any discrepancies or name changes must be explained in the approved Update.</p> <p>Correction Action Step: Stanislaus County Behavioral Health and Recovery Services (SCBHRS) will ensure that the program names listed in the CSS component section of the approved FY 2020-2023 Plan and FY 2019-20 Update, and each subsequent year thereafter, are consistent with the budget pages and names in ARER.</p> <p>Timeline Annual Update:</p> <ol style="list-style-type: none"> 1. The ARER for FY 2018-2020 was submitted and approved by DHCS in December January of 2020, this ARER is utilized to complete the FY 2019- 2020 Annual Update. CSS component sections were identified in the approved ARER for FY 2018-2019 and will be utilized to complete the Annual Update for FY 2019-2020. 2. MHSA Staff and leadership for SCBHRS will confirm program names listed in the CSS component section of the approved FY 2019-2020 Annual Update are correct and match the budget pages and names from the approved ARER from FY 2018-2019. 3. Throughout the process to write and review the Three Year Program and Expenditure Plan for FY 2020-2023 (process begins yearly in July following the annual submission and goes through 	The submitted plan is accepted.

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		<p>March), SCBHRS will confirm program names listed in the CSS component section are correct and match the ARER for FY 2019-2020 that will be submitted in January of 2021 per the Behavioral Health Information Notice (BHIN) 20-044; this process will continue for each subsequent year and explained in the Update.</p> <p>4. SCBHRS will ensure that CSS component names are correct and match future ARERs for FY 2020/2021, 2021/2022, and 2022/2023 as well as Annual Updates and Three- Year Program and Expenditure Plans.</p> <p>5. Form 5510 was submitted to DHCS on August 28, 2020 however due to signature specifications DHCS requested a new form with electronic signature. This was submitted September 3, 2020; to request late submission of the Annual Update and Three-Year Program and Expenditure Plan by July 1, 2021.</p> <p>6. The FY 2019-2020 Annual Update Local Review process will begin in February of 2021.</p> <p>7. The FY 2019-2020 Annual Update will be approved by June of 2021 for submission by July 1, 2021.</p>	

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			On or before July 1, 2021 SCBHRS will submit evidence of Finding #1 to DHCS for confirmation.	
Finding # 2	Stanislaus County did not dedicate at least 51% of Prevention and Early Intervention (PEI) funds to serve individuals 25 years or younger in FY 2018-19. (California Code of Regulations, title 9, § 3706(b)).	Recommendation # 3: The County must develop and implement accounting and cost allocation policies and procedures that will allow at least 51% of the PEI funds to be used to serve individuals who are 25 years old or younger.	Correction Action Step: SCBHRS will develop and implement accounting and cost allocations policies and procedures that will allow at least 51% of the PEI funds to be used to serve individuals who are 25 years or younger. Timeline for submission of correction: <ol style="list-style-type: none"> 1. Develop accounting and cost allocations policies and procedures that will allow at least 51% of the PEI funds to be used to serve individuals who are 25 years or younger by April 30, 2021. 2. Request review of the developed Policy and Procedure by SCBHRS Senior Leaders by May 30, 2021 3. Obtain approval by Senior Leaders of the Policy and Procedure for submission of evidence for Finding #2 to DHCS by June 30, 2021. 4. Provide orientation and overview of the approved Policy and Procedure to PEI teams and contractors by July 1, 2021; continuously thereafter for new PEI team members, as part of the onboarding process, as well as contractors when newly awarded or during the renewal process of their contracts. 	The submitted plan is accepted.

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			5. Quarterly reviews of the 51% target will be conducted to evaluate effectiveness of the Policy and Procedure; October 2021, January 2022, April 2022, and July 2022 to track effectiveness and ensure compliance. Agendas, sign in sheets and evaluation progress notes will be submitted.	
Finding # 3	Stanislaus County's PEI programs/ services were inconsistent with the approved FY 2017-20 Plan, FY 2018-19 Update and FY 2018-19 ARER. For example, the approved FY 2017-20 Plan described 23 programs under the PEI component (Early Intervention – eight programs, Prevention – seven programs, Outreach for Increasing recognition of Early Signs of mental illness – three	Recommendation #3: The County must ensure that the program names listed in the PEI component section of the approved FY 2020-23 Plan and FY 2019-20 Update, and each subsequent year thereafter, are consistent with the budget pages and names in the ARER. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures. Any discrepancies or name changes must be	<p>Correction Action Step: SCBHRS will ensure that the program names listed in the PEI component section of the approved FY 2020- 23 Plan and FY 2019-20 Update and each year thereafter, are consistent with the budget pages and names in the ARER. SCBHRC will ensure that if the program or service did not occur the program or service will be reported on the ARER by indicating zero expenditures. Any discrepancies or name changes will be explained in the approved Update.</p> <p>Timeline Annual Update:</p> <p>1. The ARER for FY 2018-2020 was submitted and approved by DHCS in December January of 2020, this ARER is utilized to complete the FY 2019- 2020 Annual Update. PEI component sections were identified in the approved ARER for FY 2018-2019 and will be utilized to complete the Annual Update for FY 2019-2020.</p>	The submitted plan is accepted.

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	programs, Stigma and Discrimination Reduction – two programs, and Suicide Prevention – three programs). The FY 2018-19 ARER had a total of 11 programs. (W&I Code) section 5892(g)).	explained in the approved Update.	<ol style="list-style-type: none"> 2. MHSA Staff and leadership for SCBHRS will confirm program names listed in the PEI component section of the approved FY 2019-2020 Annual Update are correct and match the budget pages and names from the approved ARER from FY 2018-2019; if the program or service did not occur a zero will be reflected in ARER, any discrepancies or name changes will be explained in the approved Update. 3. Throughout the process to write and review the Three Year Program and Expenditure Plan for FY 2020-2023 (process begins yearly in July following the annual submission and goes through March), SCBHRS will confirm program names listed in the PEI component section are correct and match the ARER for FY 2019-2020 that will be submitted in January of 2021 per the Behavioral Health Information Notice (BHIN) 20-044; this process will continue for each subsequent year and explained in the Update. 4. SCBHRS will request Training and Technical Assistance from the Policy, Monitoring, & Financing Section of DHCS to ensure compliance with naming 	

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			<p>conventions and template guidelines due to current template guidance for the ARER and the Annual Update, specifically in the PEI section, This will be requested in December of 2020.</p> <p>5. As a result, SCBHRS will ensure that the PEI component names are correct and match future ARERs for FY 2020/2021, 2021/2022, and 2022/2023 as well as Annual Updates and Three- Year Program and Expenditure Plans.</p> <p>6. Form 5510 was submitted to DHCS on August 28, 2020 however due to signature specifications DHCS requested a new form with electronic signature. This was submitted September 3, 2020; to request late submission of the Annual Update and Three-Year Program and Expenditure Plan by July 1, 2021.</p> <p>7. The FY 2019-2020 Annual Update Local Review process will begin in February of 2021.</p> <p>8. The FY 2019-2020 Annual Update will be approved by June of 2021 for submission by July 1, 2021.</p> <p>9. On or before July 1, 2021 SCBHRS will submit evidence of Finding #3 to DHCS for confirmation.</p>	
Finding # 4	The approved FY 2017-20 Plan does	Recommendation # 4: The County must	Correction Action Step: SCBHRS will identify that each program funded with PEI funds as a	The submitted

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	not identify that there is an Access and Linkage to Treatment Program under the PEI component. The approved FY 2017-20 Plan describes the Aging and Veterans Services Program under the Early Intervention Program component. The FY 2018-19 ARER lists the Aging and Veterans Services Program as an Access and Linkage to Treatment Program. (Cal. Code of Regs., tit. 9, § 3705).	<p>identify each program funded with PEI funds as a Prevention Program, and Early Intervention Program, Outreach for Increasing Recognition of Early Signs of Mental Illness Program, Stigma and Discrimination Reduction Program, Access and Linkage to Treatment Program, or Suicide Prevention Program (if applicable), in the approved FY 2020- 23 Plan and FY 2019-20 Update and each subsequent Plan, Update and ARER thereafter.</p>	<p>Prevention Program, an Early Intervention Program, Outreach for Increasing Recognition of Early Signs of Mental Illness Program, Stigma and Discrimination Reduction Program, Access and Linkage to Treatment Program, or Suicide Prevention Program (if applicable) in the approved FY 2020-23 Plan and FY 2019- 20 Update and each subsequent Plan, Update and ARER thereafter.</p> <p>Timeline Annual Update:</p> <ol style="list-style-type: none"> 1. The ARER for FY 2018-2020 was submitted and approved by DHCS in December January of 2020, this ARER is utilized to complete the FY 2019- 2020 Annual Update. PEI funded programs were identified in the approved ARER for FY 2018-2019 and will be utilized to complete the Annual Update for FY 2019-2020. 2. MHSA Staff and leadership for SCBHRS will confirm that PEI funded program are identified as a Prevention Program, an Early Intervention Program, Outreach for Increasing Recognition of Early Signs of Mental Illness Program, Stigma and Discrimination Reduction Program, Access and Linkage to Treatment <p>plan is accepted.</p>

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			<p>program or Suicide Prevention Program (if applicable) program names listed and documented appropriately in the approved FY 2019- 2020 Annual Update and that these programs are identified as they are in the ARER from FY 2018-2019.</p> <p>3. Throughout the process to write and review the Three Year Program and Expenditure Plan for FY 2020-2023 (process begins yearly in July following the annual submission and goes through March), SCBHRS will confirm PEI funded programs are identified accurately as they are in the approved ARER for FY 2019-2020 that will be submitted in January of 2021 per the Behavioral Health Information Notice (BHIN) 20-044; this process will continue for each subsequent year and explained in the Update.</p> <p>4. SCBHRS will request Training and Technical Assistance from the Policy, Monitoring, & Financing Section of DHCS to ensure compliance with naming conventions and template guidelines due to current template</p>	

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			<p>guidance for the ARER and the Annual Update, specifically in the PEI section, This will be requested in December of 2020.</p> <p>5. As a result, SCBHRS will ensure that the PEI funded programs are accurately identified in the ARERs for FY 2020/2021, 2021/2022, and 2022/2023 as well as Annual Updates and Three-Year Program and Expenditure Plans thereafter.</p> <p>6. Form 5510 was submitted to DHCS on August 28, 2020 however due to signature specifications DHCS requested a new form with electronic signature. This was submitted September 3, 2020; to request late submission of the Annual Update and Three-Year Program and Expenditure Plan by July 1, 2021.</p> <p>7. The FY 2019-2020 Annual Update Local Review process will begin in February of 2021.</p> <p>8. The FY 2019-2020 Annual Update will be approved by June of 2021 for submission by July 1, 2021.</p> <p>9. On or before July 1, 2021 SCBHRS will submit evidence of Finding #4 to DHCS for confirmation.</p>	

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Finding # 5	Stanislaus County's Workforce, Education and Training (WET) programs/services were not consistent with the approved FY 2017-20 Plan, FY 2018-19 Update and FY 2018-19 ARER. (W&I Code) section 5892(g)).	Recommendation # 5: The County must ensure that the programs listed in the WET component section of the approved FY 2020-23 Plan and FY 2019-20 Update, and each subsequent year thereafter, are consistent with the budget pages and ARER. If the program or service did not occur, report the program or service on the ARER and indicate zero expenditures. Any discrepancies or name changes must be explained in the approved Update.	<p>Correction Action Step: SCBHRS will ensure that the programs listed in the WET component section of the approved FY 2020-23 Plan and FY 2019-20 Update, and each subsequent year thereafter, are consistent with the budget pages and ARER. If the program or service did not occur, SCBHRS will report the program or service on the ARER by indicating zero expenditures. Any discrepancies or name changes will be explained in the approved Update.</p> <p>Timeline Annual Update:</p> <ol style="list-style-type: none"> 1. The ARER for FY 2018-2020 was submitted and approved by DHCS in December January of 2020, this ARER is utilized to complete the FY 2019- 2020 Annual Update. WET component sections were identified in the approved ARER for FY 2018-2019 and will be utilized to complete the Annual Update for FY 2019-2020. 2. MHSA Staff and leadership for SCBHRS will confirm that the programs listed in the WET component section of the approved FY 2019-2020 Annual Update are correct and match the budget pages and names from the approved ARER 	The submitted plan is accepted.

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			<p>from FY 2018-2019; if the program or service did not occur a zero will be reflected in ARER, any discrepancies or name changes will be explained in the approved Update.</p> <p>3. Throughout the process to write and review the Three Year Program and Expenditure Plan for FY 2020-2023 (process begins yearly in July following the annual submission and goes through March), SCBHRS will confirm programs listed in the WET component section are correct and match the ARER for FY 2019-2020 that will be submitted in January of 2021 per the Behavioral Health Information Notice (BHIN) 20-044; this process will continue for each subsequent year and explained in the Update.</p> <p>4. SCBHRS will ensure that the WET programs listed are correct and match future ARERs for FY 2020/2021, 2021/2022, and 2022/2023 as well as Annual Updates and Three-Year Program and Expenditure Plans.</p> <p>5. Form 5510 was submitted to DHCS</p>	

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			<p>on August 28, 2020 however due to signature specifications DHCS requested a new form with electronic signature. This was submitted September 3, 2020; to request late submission of the Annual Update and Three-Year Program and Expenditure Plan by July 1, 2021.</p> <p>6. The FY 2019-2020 Annual Update Local Review process will begin in February of 2021.</p> <p>7. The FY 2019-2020 Annual Update will be approved by June of 2021 for submission by July 1, 2021.</p> <p>8. On or before July 1, 2021 SCBHRS will submit evidence of Finding #5 to DHCS for confirmation.</p>	
Suggested Improvement Item # 1	MHSA Policies, Procedures, Evaluation and Training	Suggested Improvement # 1: DHCS recommends the County develop and implement an MHSA training program and identify processes and supports including: a) Policies and procedures that	SCBHRS will review the suggested improvements and identify current training programs and processes that support building MHSA understanding and knowledge in the areas of: a) Policies and procedures that incorporate MHSA general principles b) Requirements and components (CPPP, CSS (FSP/GSD/O&E), PEI, INN, WET, CFTN) c) Funding and reporting requirements d) Plans and Updates	The submitted plan is accepted.

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		incorporate MHSA general principles. b) Requirements and components (CPPP, CSS (FSP/GSD/O&E), PEI, INN, WET, CFTN). c) Funding and reporting requirements. d) Plans and Updates. e) Other needs such as staffing, performance objectives and outcomes.	e) Other needs such as staffing, performance objectives and outcomes. Due to competing deadlines with DHCS on the implementation and execution of audit findings SCBHRS will commence the review of items (a) through (c) in the new program cycle/fiscal year 2021-2022 that begins July 1, 2021 in alignment with the MHSA Annual Update and Three Year Plan for 2020-2023. After our review is complete SCBHRS will provide DHCS a copy of our summary review of suggested improvements, a summary of our internal process related to the suggested improvements and any supporting summaries where new or added plans, timelines and scopes of work were created and/or enhanced to address the suggested improvements. Summaries will be provided January 28, 2022. Throughout the review of these suggested improvements SCBHRS will request training and technical assistance from DHCS Community Services Division for further assistance.	
Suggested Improvement Item # 1a	MHSA Policies, Procedures,	Suggested Improvement # 1a:	SCBHRS will work internally to review current evaluation practices around effectiveness of programs and services as well as ongoing	The submitted

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	Evaluation and Training	The training should also address how the county will evaluate the effectiveness of programs/services they deliver and their on-going quality improvement strategies.	<p>improvement strategies to determine areas of strengths or improvement opportunities and how these are communicated throughout MHSA Service Delivery Components.</p> <p>Due to competing deadlines with DHCS on the implementation and execution of audit findings SCBHRS will commence the review of this suggested improvement in the new program cycle/fiscal year 2021-2022 that begins July 1, 2021 in alignment with the MHSA Annual Update and Three-Year Plan for 2020-2023.</p> <p>An internal review summary of suggested improvement one (a) will be added to the suggested improvement number one on January 28, 2022.</p>	plan is accepted.
Suggested Improvement Item # 1b	MHSA Policies, Procedures, Evaluation and Training	Suggested Improvement # 1b: DHCS recommends MHSA training for all mental health employees and service providers involved in complete delivery of services to recipients of MHSA programs; and documentation of annual training.	SCBHRS will review the suggested improvement and explore the need and feasibility in creating an MHSA training for all mental health employees and service providers involved in complete delivery of services to recipients of MHSA programs. Current engagement with SCBHRS Mental Health Employees and Services Providers does include general knowledge and expectations of MHSA and how these relate within their scope of work and practices. SCBHRS will have to conduct an assessment of how documentation of these practices is currently being captured or how they can be included and/or developed.	The submitted plan is accepted.

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			<p>Due to competing deadlines with DHCS on the implementation and execution of audit findings SCBHRS will commence the review of this suggested improvement in the new program cycle/fiscal year 2021-2022 that begins July 1, 2021 in alignment with the MHSA Annual Update and Three-Year Plan for 2020-2023.</p> <p>An internal review summary of suggested improvement one (b) will be added to the suggested improvement number one on January 28, 2022.</p>	
Suggested Improvement Item # 1c	MHSA Policies, Procedures, Evaluation and Training	Suggested Improvement # 1c: DHCS recommends MHSA training to all new employees; and documentation of annual training.	<p>SCBHRS will utilize the above process and timeline and in addition will explore coordinating any resulting training initiative with our Human Resources department and their onboarding process.</p> <p><i>DHCS accepts with a timeline due date of January 28, 2022.</i></p>	The submitted plan is accepted.
Suggested Improvement Item # 2	MHSA Documentation	Suggested Improvement # 2: DHCS recommends client's signature on the Individual Service and Support Plan (ISSP)/Treatment Plan be accessible	<p>SCBHRS will review how the ISSP/Treatment Plan are captured in the Electronic Health Record (EHR) as well as the suggested improvement to determine if an adjustment needs to be made and/or if technical and training assistance is needed to further understand this suggested improvement.</p> <p>Due to competing deadlines with DHCS on the</p>	The submitted plan is accepted.

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		for viewing in the Electronic Health Record (EHR) to verify client has signed the agreement as documented in the file.	<p>implementation and execution of audit findings SCBHRS will commence the review of this suggested improvement in the new program cycle/fiscal year 2021-2022 that begins July 1, 2021 in alignment with the MHSA Annual Update and Three-Year Plan for 2020-2023.</p> <p>After review SCBHRS will include a summary of steps taken to review suggested improvement number two in the summary that will be submitted on January 28, 2022.</p>	
Suggested Improvement Item # 3	MHSA Clarity and Redundancy	Suggested Improvement # 3: DHCS recommends the county review and edit their Plans and Updates for clarity and redundancy. There were multiple instances where it was difficult for the reader to comprehend the content due to discrepancies and redundancy throughout the document. An example, in the FY 2018-19 Update:	<p>As part of our plan for corrections listed for our audit findings previously submitted, SCBHRS review and edit our Plan and Update for clarity and redundancy. The process and timelines to do this are included throughout Findings number one through five.</p> <p><i>DHCS accepts with a timeline due date of January 28, 2022.</i></p>	The submitted plan is accepted.

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		<p>Clarity a. It is stated that the county has five PEI program categories versus the required six. Access and Linkage was not identified as a PEI required category (p 65). b. The Aging and Veteran’s Services is identified as a program under the PEI Early Intervention category (p 69). c. The FY 2018-19 ARER identifies the Aging and Veterans Services as the Access and Linkage PEI category.</p> <p>Clarity and Redundancy a. It is stated that PEI regulations require at least one program is dedicated to Access</p>	

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		<p>and Linkage. West Modesto King Kennedy Center has been identified as the program with the focus (p 70).</p> <p>b. It is stated that PEI regulations require at least one program be dedicated to Access and Linkage. West Modesto Early Intervention has been identified as the program with the focus (p75).</p> <p>c. It is stated that PEI regulations require at least one program is dedicated to Access and Linkage. West Modesto King Kennedy Center has been identified as the program with the focus (p 82).</p> <p>d. It is stated that PEI regulations require at least one program be</p>	

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		dedicated to Access and Linkage. West Modesto King Kennedy Neighborhood Collaborative County Based - Early Intervention Services (WMKKNCCBEIS) has been identified as the program with the focus (p 86).		